Fill in this information to identify your case:	
Debtor 1 Melvin Chappell, Jr.	
Debtor 2 Charlene D. Grace-Chappell (Spouse, if filing)	
United States Bankruptcy Court for the: EASTERN DISTRICT OF PENNSYLVANIA	
Case number 16-17021-mdc	Check if this is:
(If known)	■ An amended filing □ A supplement showing postpetition chapter 13 income as of the following date:
Official Form 106I	MM / DD/ YYYY

## Official Form 1061

### Schedule I: Your Income

12/15

Be as complete and accurate as possible. If two married people are filing together (Debtor 1 and Debtor 2), both are equally responsible for supplying correct information. If you are married and not filing jointly, and your spouse is living with you, include information about your spouse. If you are separated and your spouse is not filing with you, do not include information about your spouse. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

#### Describe Employment Fill in your employment Debtor 1 Debtor 2 or non-filing spouse information. ■ Employed Employed If you have more than one job, **Employment status** attach a separate page with ■ Not employed ■ Not employed information about additional employers. Occupation Truck Driver General Clerk - Lobby Include part-time, seasonal, or Employer's name JDM Materials Co. Temple University Hospital self-employed work. **Employer's address** 2450 W Hunting Park Avenue Occupation may include student 851 County Line Road c/o TUHS Legal or homemaker, if it applies. Huntingdon Valley, PA 19006 Philadelphia, PA 19129 How long employed there? 1.5 years 16 years

#### **Give Details About Monthly Income** Part 2:

Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your non-filling spouse unless you are separated.

If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form.

For Debtor 1

For Debtor 2 or

					non-	filing spouse
2.	<b>List monthly gross wages, salary, and commissions</b> (before all payroll deductions). If not paid monthly, calculate what the monthly wage would be.	2.	\$_	4,640.13	\$	2,551.03
3.	Estimate and list monthly overtime pay.	3.	+\$_	498.51	+\$ _	161.16
4.	Calculate gross Income. Add line 2 + line 3.	4.	\$	5,138.64	\$	2,712.19

Official Form 106I Schedule I: Your Income page 1

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Debto Debto		Melvin Chappell, Jr. Charlene D. Grace-Chappell		Case	e number ( <i>if known</i> )	16-170	021-m	dc	
	0	vulling 4 hours	4.	Fo \$	r Debtor 1		ebtor 2	ouse	
	Cop	y line 4 here	4.	Φ_	5,138.64	Φ	2,7	'12.19	<u> </u>
5.	List	all payroll deductions:							
	5a.	Tax, Medicare, and Social Security deductions	5a.	\$_	1,348.40	\$	5	51.20	
	5b.	Mandatory contributions for retirement plans	5b.	\$_	0.00	\$		0.00	_
	5c.	Voluntary contributions for retirement plans	5c.	\$_	102.79	\$		51.00	
	5d. 5e.	Required repayments of retirement fund loans Insurance	5d. 5e.	\$ _	0.00	\$		0.00 346.62	_
	5e. 5f.	Domestic support obligations	5e. 5f.	φ_ \$	0.00	\$ 		0.00	
	5g.	Union dues	5g.	\$-	0.00	\$		53.69	
	5h.	Other deductions. Specify: Disability insurance	5h.+	\$		+ \$		36.83	
6.	Add	the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6.	\$ _	1,458.30	\$	1,0	39.34	<u> </u>
7.	Cald	culate total monthly take-home pay. Subtract line 6 from line 4.	7.	\$_	3,680.34	\$	1,6	72.85	5_
8.	List 8a.	all other income regularly received:  Net income from rental property and from operating a business, profession, or farm  Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.	8a.	\$	0.00	\$		0.00	)
	8b.	Interest and dividends	8b.	\$	0.00	\$		0.00	
	8c.	Family support payments that you, a non-filing spouse, or a dependence regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.	8c.	\$_	0.00	\$		0.00	
	8d.	Unemployment compensation	8d.	\$_	0.00	\$	5	79.92	_
	8e. 8f.	Social Security Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistant that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies.		\$_	0.00	\$		0.00	_
	_	Specify:	8f.	\$_	0.00	\$		0.00	
	8g.	Pension or retirement income	8g. 8h.+	\$ \$	0.00	\$		0.00	_
	8h.	Other monthly income. Specify:		Ψ_	0.00	- Φ <u> </u>		0.00	<u>)                                    </u>
9.	Add	all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	\$_	0.00	\$		579.9	92
10.		culate monthly income. Add line 7 + line 9. the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	10. \$		3,680.34 + \$_	2,25	52.77	= \$ _	5,933.11
11.	Inclu othe Do r	te all other regular contributions to the expenses that you list in Schedu de contributions from an unmarried partner, members of your household, your friends or relatives. not include any amounts already included in lines 2-10 or amounts that are notify:	our depen		•		chedule 11.		0.00
12.		I the amount in the last column of line 10 to the amount in line 11. The e that amount on the Summary of Schedules and Statistical Summary of Celies					12.	\$	5,933.11
								Comb	
13.	Do y	you expect an increase or decrease within the year after you file this for No.	rm?					month	ily income

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Fill in this information to identify your case:					
Debtor 1	Melvin Chappell, J	r.			
	First Name	Middle Name	Last Name		
Debtor 2	Charlene D. Grace	-Chappell			
(Spouse if, filing)	First Name	Middle Name	Last Name		
United States Bankruptcy Court for the:		EASTERN DISTRICT OF PENNSYLVANIA			
Case number (if known)	16-17021-mdc				

Check if this is an amended filing

### Official Form 106Dec

## **Declaration About an Individual Debtor's Schedules**

12/15

If two married people are filing together, both are equally responsible for supplying correct information.

You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Sign Below	
Did you pay or agree to pay someone who is NOT an	attorney to help you fill out bankruptcy forms?
■ No	
Yes. Name of person	. Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).
Under penalty of perjury, I declare that I have read the that they are true and correct.	e summary and schedules filed with this declaration and
x Melvin Chappell, Jr. Signature of Debtor 1	Charlene D. Grace-Chappell Signature of Debtor 2
Date March 8, 2018	Date March 8, 2018